

County: Rock  
 BELOIT HEALTH/REHABILITATION CENTER  
 1905 WEST HART ROAD

Facility ID: 1500

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BELOIT 53511 Phone:(608) 365-2554  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/02): 148  
 Total Licensed Bed Capacity (12/31/02): 148  
 Number of Residents on 12/31/02: 141

Ownership:  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 143

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No									36.9
Supp. Home Care-Personal Care	No						1 - 4 Years			48.2
Supp. Home Care-Household Services	No		Developmental Disabilities	0.0	Under 65	8.5	More Than 4 Years			14.9
Day Services	No		Mental Illness (Org./Psy)	4.3	65 - 74	10.6				-----
Respite Care	Yes		Mental Illness (Other)	0.7	75 - 84	34.0				100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	38.3	*****			
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.5	Full-Time Equivalent			
Congregate Meals	No		Cancer	0.7		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	Yes		Fractures	9.9		100.0	(12/31/02)			
Other Meals	No		Cardiovascular	22.7	65 & Over	91.5	-----			
Transportation	No		Cerebrovascular	8.5		-----	RNs			
Referral Service	No		Diabetes	2.1	Sex	%	LPNs			
Other Services	No		Respiratory	12.1		-----	Nursing Assistants,			
Provide Day Programming for			Other Medical Conditions	39.0	Male	30.5	Aides, & Orderlies			
Mentally Ill	No			-----	Female	69.5				
Provide Day Programming for				100.0		-----				
Developmentally Disabled	No					100.0				

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#### Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care					
		Per Diem		Per Diem		Per Diem		Per Diem		Per Diem		Per Diem		Per Diem		Per Diem		Total Resi- dents	% Of All	
Level of Care	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	21	100.0	289	96	99.0	108	0	0.0	0	22	100.0	151	0	0.0	0	1	100.0	309	140	99.3
Intermediate	---	---	---	1	1.0	90	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	21	100.0		97	100.0		0	0.0		22	100.0		0	0.0		1	100.0		141	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							
		-----							
				% Needing				Total	
Percent Admissions from:		Activities of		Assistance of		% Totally		Number of	
		Daily Living (ADL)		One Or Two Staff		Dependent		Residents	
Private Home/No Home Health		1.0	Independent		80.9		18.4		141
Private Home/With Home Health		0.0	Bathing		69.5		15.6		141
Other Nursing Homes		2.9	Dressing		55.3		19.9		141
Acute Care Hospitals		96.1	Transferring		61.0		19.1		141
Psych. Hosp.-MR/DD Facilities		0.0	Toilet Use		23.4		7.8		141
Rehabilitation Hospitals		0.0	Eating						
Other Locations		0.0	*****						
Total Number of Admissions		204	Continence		% Special Treatments				%
Percent Discharges To:			Indwelling Or External Catheter		Receiving Respiratory Care				19.1
Private Home/No Home Health		39.1	Occ/Freq. Incontinent of Bladder		Receiving Tracheostomy Care				1.4
Private Home/With Home Health		0.0	Occ/Freq. Incontinent of Bowel		Receiving Suctioning				1.4
Other Nursing Homes		5.9			Receiving Ostomy Care				0.0
Acute Care Hospitals		18.3	Mobility		Receiving Tube Feeding				3.5
Psych. Hosp.-MR/DD Facilities		0.0	Physically Restrained		Receiving Mechanically Altered Diets				31.9
Rehabilitation Hospitals		0.0							
Other Locations		7.9	Skin Care		Other Resident Characteristics				
Deaths		28.7	With Pressure Sores		Have Advance Directives				85.8
Total Number of Discharges			With Rashes		Medications				
(Including Deaths)		202			Receiving Psychoactive Drugs				58.9

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility	Ownership: Proprietary		Bed Size: 100-199		Licensure: Skilled		All Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.6	84.7	1.14	85.7	1.13	85.3	1.13	85.1	1.14
Current Residents from In-County	92.2	81.6	1.13	81.9	1.13	81.5	1.13	76.6	1.20
Admissions from In-County, Still Residing	23.5	17.8	1.33	20.1	1.17	20.4	1.15	20.3	1.16
Admissions/Average Daily Census	142.7	184.4	0.77	162.5	0.88	146.1	0.98	133.4	1.07
Discharges/Average Daily Census	141.3	183.9	0.77	161.6	0.87	147.5	0.96	135.3	1.04
Discharges To Private Residence/Average Daily Census	55.2	84.7	0.65	70.3	0.79	63.3	0.87	56.6	0.98
Residents Receiving Skilled Care	99.3	93.2	1.07	93.4	1.06	92.4	1.07	86.3	1.15
Residents Aged 65 and Older	91.5	92.7	0.99	91.9	1.00	92.0	0.99	87.7	1.04
Title 19 (Medicaid) Funded Residents	68.8	62.8	1.10	63.8	1.08	63.6	1.08	67.5	1.02
Private Pay Funded Residents	15.6	21.6	0.72	22.1	0.70	24.0	0.65	21.0	0.74
Developmentally Disabled Residents	0.0	0.8	0.00	0.9	0.00	1.2	0.00	7.1	0.00
Mentally Ill Residents	5.0	29.3	0.17	37.0	0.13	36.2	0.14	33.3	0.15
General Medical Service Residents	39.0	24.7	1.58	21.0	1.85	22.5	1.73	20.5	1.90
Impaired ADL (Mean)	45.2	48.5	0.93	49.2	0.92	49.3	0.92	49.3	0.92
Psychological Problems	58.9	52.3	1.13	53.2	1.11	54.7	1.08	54.0	1.09
Nursing Care Required (Mean)	8.1	6.8	1.19	6.9	1.17	6.7	1.20	7.2	1.12